

BI

TRAVEL CHECKLIST

Date: _____

Name: _____ Rank: _____ SSN: _____

PACIDN: **HH13VZ6A**

DD 1351-2 Travel Voucher (**Original & 1 copy**) _____

DA 31 – PCS Leave Form (Sign in & out date must coincide with
DD 1351-2) _____

Permissive TDY Approval by LTC on DA 31 _____

Copy of Previous Travel Advance _____

DD 788 – (Vehicle Inspection & Shipping Form) _____

Plane Tickets _____

Receipts for Expenses over \$75.00 _____

Orders & Amendments (**2 Copies front & back**) _____

Statement of Non-Availability _____

DITY Checklist & Certification of Expenses _____

DD 2278 (Do It Yourself Counseling Check List) _____

DITY Weight Tickets _____

1. Receipts must be Original
2. Make sure all blanks are checked off or write in “N/A”.
3. Check over In-Processing Packets before mailing them in.

Program Managers : [] Mrs Sarabia – 1- 0926 [] Mr Gutierrez – 1-0891 [] Mr Otis – 1-2250
Com: (210) 221-xxxx [] Ms Lara – 1-1358 [] Mrs Prescott 1 –1983 (Enlisted)
DSN 471- xxxx

**Submit this Travel Checklist, along with your In-Processing documents.
Make a copy of In-Processing documents submitted for your records.**